

022404

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022404

Vidas, Arrett & Steinkraus Utility Patent Application Transmittal		Atty. Docket No	S63.2-111487
		First Inventor	Eidenschink
		Title:	ROTATABLE CATHETER ASSEMBLY
		Express Mail Label No.	EV44I6I3I80US
Application Elements		Address To:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/>	Fee Transmittal Form <input checked="" type="checkbox"/> Check Included	Pages 2	
2. <input type="checkbox"/>	Applicant claims small entity status	Pages 34	
3. <input checked="" type="checkbox"/>	Specification (including 0 pg cover sheet, 24 pg description, 9 pg claims and 1 pg abstract)	Pages 16	
4. <input checked="" type="checkbox"/>	Drawings	Pages 1	
5. <input checked="" type="checkbox"/>	Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 19 completed) i. <input type="checkbox"/> Deletion of Inventor(s) – signed statement attached deleting inventors named in the prior application	Pages	
6. <input checked="" type="checkbox"/>	Application Data Sheet	Pages 2	
7. <input checked="" type="checkbox"/>	Assignment Papers (cover sheet & documents and check) <input type="checkbox"/> Previously recorded on , Reel , Frames	Pages 2	
8. <input checked="" type="checkbox"/>	Power of Attorney <input checked="" type="checkbox"/> 37 C.F.R. 3.73(b) Statement (when there is an assignee)	Pages 1	
9. <input type="checkbox"/>	English Translation Document	Pages 3	
10. <input type="checkbox"/>	Information Disclosure Statement <input type="checkbox"/> Copies of Citations (references)	Pages	
11. <input type="checkbox"/>	Preliminary Amendment	Pages	
12. <input checked="" type="checkbox"/>	Return Receipt Postcard	Pages 1	
13. <input type="checkbox"/>	Certified Copy of Priority Document	Pages	
14. <input type="checkbox"/>	Nonpublication Request	Pages	
15. <input checked="" type="checkbox"/>	Constructive Petition	Pages 1	
16. <input checked="" type="checkbox"/>	Limited Authorization	Pages 1	
17. <input checked="" type="checkbox"/>	VAS Utility Patent Application Transmittal	Pages 1	
18. <input type="checkbox"/>	Other	Pages	
19. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet			
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part Of prior application no. _____			
Prior Application Information: Examiner _____ Group Art Unit _____			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.			
20. TOTAL NUMBER OF PAGES <u>65</u>			
21. CORRESPONDENCE ADDRESS			
CUSTOMER NUMBER 490			
Name	James M. Urzedowski, Reg. No. 48,596		
Signature	Date 2/24/2004		

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FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

 Applicant claims small entity status. See CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1170.00)

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order Other None Deposit Account:

Deposit Account Number: 22-0350

Deposit Account Name: Vidas, Arrett & Steinkraus

The Commissioner is authorized to: (check all that apply)

- Charge the fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Fee	Entity Fee	Small Fee	Entity Fee	Fee Description	Fee Paid
Code		Code	(\\$)		
1001	770	2001	385	Utility filing fee	\$770.00
1002	340	2002	170	Design filing fee	---
1003	530	2003	265	Plant filing fee	---
1004	770	2004	385	Reissue filing fee	---
1005	160	2005	80	Provisional filing fee	---

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	50	-20** =	30	Extra Claims	Fee from below	Fee Paid
Independent Claims	3	- 3*** =		X	\$18.00	= 360.00

Multiple Dependent Large Fee	Entity Fee	Small Fee	Entity Fee	Fee Description
Code	(\\$)	Code	(\\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 360.00)

** or number previously paid, if greater; For Reissues, see above

Complete if Known

Application Number	--
Filing Date	Concurrently herewith
First Named Inventor	Eidenschink
Examiner Name	--

Art Unit

Attorney Docket No. S63.2-11487

FEE CALCULATION (continued)

3. ADDITIONAL FEES			
Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	(\\$)	Fee Code	(\\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	420	2252	210
1253	950	2253	475
1254	1,480	2254	740
1255	2,010	2255	1,005
1401	330	2401	165
1402	330	2402	165
1403	290	2403	145
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,330	2453	665
1501	1,330	2501	665
1502	480	2502	240
1503	640	2503	320
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	770	2809	385
1810	770	2810	385
1801	770	2801	385
1802	900	1802	900
Other fee (specify) _____			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 1170.00)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	James M. Urzedowski	Registration No.	48,596	Telephone	952-563-3000
Signature				Date	2/24/2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	Tracee Eidenschink
Application No.:	Not Assigned
Filed:	Not Assigned
For:	ROTATABLE CATHETER ASSEMBLY
Group Art Unit:	Not Assigned

Mail Stop Patent Appln
Commissioner for Patents Docket No.: S63.2B-11487-US01
P.O. Box 1450
Alexandria, VA 22313-1450

**CONSTRUCTIVE PETITION FOR EXTENSION OF TIME AND FEE
AUTHORIZATION PURSUANT TO 37 C.F.R. §1.136(a)(3)**

Applicant hereby requests that the United States Patent and Trademark Office treat any concurrent or future reply requiring a petition for an extension of time pursuant to §1.136 for its timely submission as incorporating therein a petition for an extension of time for the appropriate length of time.

Applicant authorizes the Commissioner of Patents and Trademarks to charge all required extension of time fees that have not otherwise been paid to Deposit Account No. 22-0350.

Respectfully submitted,

VIDAS, ARRETT & STEINKRAUS

By:

James M. Urzedowski
Registration No.: 48596

Date: February 24, 2004

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